

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Adams for Congress

ADDRESS (number and street)
▼

PO Box 878

Check if different
than previously
reported. (ACC)

Des Moines

IA

50304

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00580282

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IA

03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

06

D D /

08

Y Y Y Y /

2015

through

M M /

09

D D /

30

Y Y Y Y /

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chay Williams

Signature of Treasurer

Chay Williams

[Electronically Filed]

Date

M M /

10

D D /

15

Y Y Y Y /

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Adams for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	22824.77	22824.77
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	22824.77	22824.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16478.99	16478.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	16478.99	16478.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6185.78	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	13250.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Adams for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

18100.00

18100.00

(ii) Unitemized.....

4724.77

4724.77

(iii) TOTAL of contributions from individuals ▶

22824.77

22824.77

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

22824.77

22824.77

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

22824.77

22824.77

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 22

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16478.99	16478.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	160.00	160.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16638.99	16638.99

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22824.77
25. SUBTOTAL (add Line 23 and Line 24).....	22824.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16638.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6185.78

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Adams for Congress

A. Full Name (Last, First, Middle Initial) John Allen		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015	
Mailing Address 515 River Oaks Drive		Transaction ID : SA11AI.4212	
City River Forest	State IL	Zip Code 60305	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Family Health Network	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
B. Full Name (Last, First, Middle Initial) Amos Anderson		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015	
Mailing Address 3758 Swoboda Road		Transaction ID : SA11AI.4230	
City Verona	State WI	Zip Code 53593	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer 100 Black Men of Madison	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
C. Full Name (Last, First, Middle Initial) Harry Bookey		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2015	
Mailing Address 11 SW 51st Street		Transaction ID : SA11AI.4159	
City Des Moines	State IA	Zip Code 50312-2139	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer BH Equities	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....		1600.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Adams for Congress

Full Name (Last, First, Middle Initial)

Darron Brawner

Mailing Address P.O. Box 670

City
 Carolyn

State
 IA

Zip Code
 42327

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Self Employed

Occupation
 Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 28 2015

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period

500.00

1507280001

Full Name (Last, First, Middle Initial)

Frederick Buie

Mailing Address 4848 Oakwood Lane

City
 West Des Moines

State
 IA

Zip Code
 50265

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Keystone Electric

Occupation
 Engineer/Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 30 2015

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

2700.00

1507310001

Full Name (Last, First, Middle Initial)

Ora Conliffe

Mailing Address 135 Silverthorn Drive

City
 Tyrone

State
 GA

Zip Code
 30290

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Information Requested

Occupation
 Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 08 2015

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period

500.00

1507084000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Adams for Congress

A. Full Name (Last, First, Middle Initial)
Nathan J. Cox

Mailing Address 3151 S St., Apt 220

City	State	Zip Code
Sacramento	CA	95816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2015

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period

250.00

1506230001

B. Full Name (Last, First, Middle Initial)
Kelly Ferguson

Mailing Address 12302 Townsend Avenue

City	State	Zip Code
Urbandale	IA	50323

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Meyocks GroupOccupation
Marketing Research

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		09		2015

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period

500.00

1507094000

C. Full Name (Last, First, Middle Initial)
Don Goens

Mailing Address 3037 Lawrence cr

City	State	Zip Code
Flossmoor	IL	60422

FEC ID number of contributing
federal political committee.

C

Name of Employer
FSH CommunicationsOccupation
Iwner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		27		2015

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period

500.00

1509274000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

Lynn Graves

Mailing Address 65 Fox Landing

City

Waukee

State

IA

Zip Code

50263

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2015

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period

250.00

1507254000

Full Name (Last, First, Middle Initial)

Robert Harris

Mailing Address 4082 Sequoyah Road

City

Oakland

State

CA

Zip Code

94605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period

250.00

1508240001

Full Name (Last, First, Middle Initial)

John Hatch

Mailing Address 696 18th Street

City

Des Moines

State

IA

Zip Code

50314-1078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2015

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period

1500.00

1509090001

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

Cain Hayes

Mailing Address 4550 Sixpenny Circle

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aetna

Occupation

Divisional President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2015

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period

2700.00

1508033000

Full Name (Last, First, Middle Initial)

Thomas Hill

Mailing Address 3715 Grayhawk Avenue

City

Ames

State

IA

Zip Code

50010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iowa State University

Occupation

Professor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2015

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period

300.00

1509240001

Full Name (Last, First, Middle Initial)

Charlotte Hubbell

Mailing Address 2300 Terrace Road

City

Des Moines

State

IA

Zip Code

50312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Business owner/Community Leader

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2015

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period

2700.00

1507280002

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Adams for CongressFull Name (Last, First, Middle Initial)
A. Frederick Hubbell

Mailing Address 2300 Terrace Road

City	State	Zip Code
Des Moines	IA	50312

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2015

Transaction ID : SA11AI.4309

Amount of Each Receipt this Period

1000.00

1506080001

Full Name (Last, First, Middle Initial)
B. G. David Hurd

Mailing Address 300 Walnut Street Unit 183

City	State	Zip Code
Des Moines	IA	50309-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period

250.00

1508240001

Full Name (Last, First, Middle Initial)
C. Matthew Jeter

Mailing Address 2616 NE Horseshoe Dr

City	State	Zip Code
Lee's Summit	MO	64086

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2015

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

250.00

1507234000

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Adams for Congress

A. Full Name (Last, First, Middle Initial) James Lindberg			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>28</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	07		28		2015
M M M	/	D D D	/	Y Y Y Y Y										
07		28		2015										
Mailing Address 1616 38th Street			Transaction ID : SA11AI.4145											
City	State	Zip Code												
Des Moines	IA	50310-4541												
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Name of Employer Retired		Occupation College Professor - Cheistry	1507280001											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>			250.00									
250.00														

B. Full Name (Last, First, Middle Initial) Thomas Phillips			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>29</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	09		29		2015
M M M	/	D D D	/	Y Y Y Y Y										
09		29		2015										
Mailing Address 31398 Chardonay Point			Transaction ID : SA11AI.4238											
City Waukeese State IA Zip Code 50263														
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>		300.00									
300.00														
Name of Employer DuPont		Occupation Manager	1509294000											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>			300.00									
300.00														

C. Full Name (Last, First, Middle Initial) Margaret Schilling			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		03		2015
M M M	/	D D D	/	Y Y Y Y Y										
08		03		2015										
Mailing Address 3120 E Titus Ave			Transaction ID : SA11AI.4165											
City Des Moines State IA Zip Code 50320														
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Name of Employer N/A		Occupation Retired	1508034000											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>			250.00									
250.00														

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">800.00</td> </tr> </table>		800.00				
800.00									
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

Nathaniel Sutton

A.

Mailing Address 10 Thornwood Drive

City

Flossmoor

State

IL

Zip Code

60422-1950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sutton Auto Team

Occupation

Sales Executive

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2015

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

300.00

1509240001

Full Name (Last, First, Middle Initial)

Keith Whipple

B.

Mailing Address PO Box 10838

City

Cedar Rapids

State

IA

Zip Code

52410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Writer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		20		2015

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

250.00

1507204000

Full Name (Last, First, Middle Initial)

Larry Wilson

C.

Mailing Address 1902 80th Street

City

Windsor Heights

State

IA

Zip Code

50324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		15		2015

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period

500.00

1507154000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Adams for Congress

Full Name (Last, First, Middle Initial)

Connie Wimer

Mailing Address 100 Fourth Street

City

Des Moines

State

IA

Zip Code

50309

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2015

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period

500.00

1508064000

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

18100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Advantage Payroll

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

1846.76

Transaction ID : SB17.4280

B. Advantage Payroll

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement
Payroll Service Fee

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

86.12

Transaction ID : SB17.4282

c. Advantage Payroll

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

1483.62

Transaction ID : SB17.4283

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3416.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Advantage Payroll

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement
Payroll Service Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

82.24

Transaction ID : SB17.4294

B. Advantage Payroll

Mailing Address 126 Merrow Rd.

City	State	Zip Code
Auburn	ME	04210-8896

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

157.18

Transaction ID : SB17.4295

c. Rania Batrice

Mailing Address 2824 Grand Ave

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

1955.71

Transaction ID : SB17.4308

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2195.13

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address PO Box 619616

City	State	Zip Code
DFW Airport	TX	75261-9616

Purpose of Disbursement
Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

356.20

Transaction ID : SB17.4308.0

[MEMO ITEM]

B. Southwest Airlines

Mailing Address 2702 Love Field Dr.

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

460.50

Transaction ID : SB17.4308.1

[MEMO ITEM]

C. Grand Colony

Mailing Address 319 7th St.

City	State	Zip Code
Des Moines	IA	50309

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

1139.01

Transaction ID : SB17.4308.2

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Political C.F.O.s., Inc.

Mailing Address 2452 Vale Way

City	State	Zip Code
Erie	CO	80516

Purpose of Disbursement
Accounting & Compliance Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

450.00

Transaction ID : SB17.4286

B. Adam SchantzMailing Address 2824 Grand Ave.
Unit 309

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

1851.30

Transaction ID : SB17.4301

c. Adam SchantzMailing Address 2824 Grand Ave.
Unit 309

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

2004.67

Transaction ID : SB17.4304

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4305.97

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Adam SchantzMailing Address 2824 Grand Ave.
Unit 309City State Zip Code
Des Moines IA 50312Purpose of Disbursement
Reimbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

358.20

Transaction ID : SB17.4306

B. Nation BuilderMailing Address 520 S. Grand Ave
2nd FloorCity State Zip Code
Los Angeles CA 90071Purpose of Disbursement
Software License Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

358.20

Transaction ID : SB17.4306.0

[MEMO ITEM]

c. SignapayMailing Address 105 Decker Court
Suite 650City State Zip Code
Irving TX 75062Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

72.25

Transaction ID : SB17.4292

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

430.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Josh L. Skipworth

Mailing Address 150 NE 41st St., #312

City	State	Zip Code
Ankeny	IA	50021

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

2310.69

Transaction ID : SB17.4302

B. Josh L. Skipworth

Mailing Address 150 NE 41st St., #312

City	State	Zip Code
Ankeny	IA	50021

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2015

Amount of Each Disbursement this Period

1154.84

Transaction ID : SB17.4305

c. The Public Relations Project

Mailing Address 4400 EP True Pkwy, Unit 52

City	State	Zip Code
West Des Moines	IA	50265

Purpose of Disbursement
Communications Consulting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4288

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4465.53

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Adams for Congress

Full Name (Last, First, Middle Initial)

A. Chay Williams

Mailing Address 7020 Cheridan Circle

City	State	Zip Code
Urbandale	IA	50322

Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

858.85

Transaction ID : SB17.4307

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

858.85

15672.43

FOR LINE NUMBER:
(check only one)

	17		18		19a		19b
	20a		20b		20c		X 21

Adams for Congress

A. Rania Batrice

Mailing Address 2824 Grand Ave

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
Des Moines	IA	50312

Purpose of Disbursement	Reimbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House	Disbursement For: 2016
	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) _____

State: District:

Amount of Each Disbursement this Period

Transaction ID : SB21.4326

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> President			

State: District:

Amount of Each Disbursement this Period



Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> President			

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Age group	Number of people
0-14	160
15-24	140
25-34	120
35-44	100
45-54	80
55-64	60
65-74	40
75-84	20
85-94	10
95-104	10

160.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 OF 22

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Adams for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DAC Strategy

Nature of Debt (Purpose):

General Campaign Consulting

Mailing Address 1409 S. Lamar
#825City State Zip Code
Dallas TX 75215

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4334

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Political C.F.O.s., Inc.

Nature of Debt (Purpose):

Accounting & Compliance Services

Mailing Address 2452 Vale Way

City State Zip Code
Erie CO 80516

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4333

Amount Incurred This Period

5750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

13250.00

2) **TOTALS** This Period (last page this line number only) ▶

13250.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

13250.00